MAR 1 9 200

Docket No.: PF-0229-1 DIV

TRADE Whereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope

By: Printed:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Jennifer L. Hillman, Surya K. Goli

Title:

NOVEL HUMAN MITOCHONDRIAL MEMBRANE PROTEIN

Serial No.:

09/208,619

Filing Date:

December 8, 1998

Examiner:

Harris, A.

Group Art Unit:

1642

Commissioner for Patents

Box AF

Washington, D.C. 20231

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Sir:

Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the decision dated <u>December 15, 2000</u>, of the Examiner's rejection of Claims <u>17, 18, 32</u>, and <u>33</u>.

Please charge the Appeal fee of \$310.00 required under 37 CFR 1.17(b) to Deposit Account No. **09-0108.** The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayments to Deposit Account No. 09-0108. This form is enclosed in duplicate.

03/20/2001 HVUONG1 00000018 090108

01 FC:119 310.00 CH Respectfully submitted,

INCYTE GENOMICS, INC.

Date: 3/15/0/

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09/208,619



AF/1642/\$

Docket No.: PF-0229-1 DIV

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on March 15, 2001.

By: Printed:

Naricy L. GLynn

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Hillman et al.

Title:

NOVEL HUMAN MITOCHONDRIAL MEMBRANE PROTEIN

Serial No.:

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Harris, A.

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Box AF

Commissioner for Patents Washington, D.C. 20231

TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

- 1. Return Receipt Postcard; and
- 2. Notice of Appeal (1 pg., in duplicate).

X Notice of Appeal Fee

\$ 310.00

 $\overline{\mathbf{x}}$

Please charge Incyte Genomics, Inc. Deposit

Account No. 09-0108 the amount of

\$ 310.00

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

INCYTE GENOMICS, INC.

Date:

3/15/01

P. Ben Wang

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